

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION <input type="checkbox"/> Declaration <input checked="" type="checkbox"/> Declaration Submitted with Submitted after initial Initial Filing Filing (surcharge 37 CFR 1.16(e) required)	Attorney Docket No.	AWR-004
	First Named Inventor	Gross et al.
	COMPLETE IF KNOWN	
	Application Serial Number	PCT/US98/21442
	Filing Date	10/09/98
	Group Assignment	Not Yet Assigned
	Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPLITTERLESS MULTICARRIER MODEM

(Title of the Invention)

the specification of which

☐ is attached hereto
OR
☒ was filed on 10/09/1998 as United States Application Serial Number or PCT International (MM/DD/YYYY)

Application Number PCT/US98/21442 and was amended on (MM/DD/YYYY) 08/23/1999 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent Office all information known by me to be material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Serial Number(s)	Filing Date (MM/DD/YYYY)	
60/061,689	10/10/97	<input type="checkbox"/> Additional provisional application serial numbers are listed on a supplemental priority data sheet attached hereto.

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c), of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Serial Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US98/21442	10/09/1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below



Place Customer
Number Bar Code
Label Here


Name	Registration Number	Name	Registration Number
Steven M. Bauer	31,481	Thomas C. Meyers	36,989
John V. Bianco	36,748	Joseph B. Milstein	42,897
Isabelle A.S. Blundell	43,321	David G. Miranda	42,898
Maureen A. Bresnahan	44,559	Ronda P. Moore	44,244
Michael H. Brodowski	41,640	Edmund R. Pitcher	27,829
Jennifer A. Camacho	43,526	Dianne M. Rees	45,281
Joseph A. Capraro, Jr.	36,471	Michael A. Rodriguez	41,274
John J. Cotter	38,116	R. Stephen Rosenholm	45,283
John V. Fortier	42,545	Christopher W. Stamos	35,370
Michael J. Giannetta	42,574	Joseph P. Sullivan	45,349
Duncan A. Greenhalgh	38,678	Robert J. Tosti	35,393
William G. Guerin	41,047	Thomas A. Turano	35,722
Ira V. Heffan	41,059	Michael J. Twomey	38,349
Danielle L. Herritt	43,670	Christine C. Vito	39,061
Mi Kim	44,830	Patrick R.H. Waller	41,418
Douglas J. Kline	35,574	Daniel A. Wilson	P-45,508
John D. Lanza	40,060	Yin P. Zhang	44,372
Timothy P. Linkkila	40,702		
Kurt W. Lockwood	40,704		

☐ Additional registered practitioners named on supplemental Registered Practitioner Information sheet attached hereto.

Direct all correspondence to:

Patent Administrator
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])						Family Name or Surname					
Richard W.						Gross					
Inventor's Signature								Date			
Residence	City	Acton	State	MA	Country	USA	Citizenship	USA			
Post Office Address		14 Balsam Drive									
P.O. Address (line 2)	City	Acton	State	MA	ZIP	01720	Country	USA			
Name of Additional or Joint Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])						Family Name or Surname					
John A.						Greszczuk					
Inventor's Signature								Date			
Residence	City	Stow	State	MA	Country	USA	Citizenship	USA			
Post Office Address		18 Lowell Drive									
P.O. Address (line 2)	City	Stow	State	MA	ZIP	01775	Country	USA			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])						Family Name or Surname					
David M.						Krinsky -					
Inventor's Signature								Date			
Residence	City	Acton	State	MA	Country	USA	Citizenship	USA			
Post Office Address		4 Ayer Road									
P.O. Address (line 2)	City	Acton	State	MA	ZIP	01720	Country	USA			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])						Family Name or Surname					
Marcos						Tzannes					
Inventor's Signature								Date		Feb 10, 2000	
Residence	City	Orinda	State	CA	Country	USA	Citizenship				
Post Office Address		121 LaEspiral									
P.O. Address (line 2)	City	Orinda	State	CA	ZIP	94563	Country	USA			
<input checked="" type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor sheet attached hereto.											

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Michael A.				Tzannes				
Inventor's Signature						Date		
Residence	City	Lexington	State	MA	Country	USA	Citizenship	USA
Post Office Address		17 Carley Road						
P.O. Address (line 2)	City	Lexington	State	MA	ZIP	02173	Country	USA

939427